

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/828,267 876

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	7	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	7 minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	REMAINING AFTER AMENDMENT			
Total	7	Minus	20	=
Independent	1	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY TYPE  OR OTHER THAN SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	720

OTHER THAN SMALL ENTITY

AMENDMENT A	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
4/2/04			
Total	7	Minus	20
Independent	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	REMAINING AFTER AMENDMENT			
Total	7	Minus	20	=
Independent	1	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

AMENDMENT B	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
4/2/04			
Total	7	Minus	20
Independent	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	REMAINING AFTER AMENDMENT			
Total	7	Minus	20	=
Independent	1	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

AMENDMENT C	SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
4/2/04			
Total	7	Minus	20
Independent	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.